

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10796691
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
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50	/					
TOTAL IND.	16		11		12	
TOTAL DEP.	11		2		2	
TOTAL CLAIMS	27		13		14	

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51	/					
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100						
TOTAL IND.	16		11		12	
TOTAL DEP.	11		2		2	
TOTAL CLAIMS	27		13		14	